FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZ	ATION		
i Oitini i	(See instructi	ions)		Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
CNA FINANCI	AL CORPORATION CITIZENS FO	OR GOOD GOVERNMENT	L. I.	
ADDRESS (number and	street) 333 S. WABASH		<u> </u>	
(Check if address is changed)	43-S	1111111	<u> </u>	11111111
	CHICAGO			60604 -
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e	e-mail address)		
(Check if address is changed)	karen.melchert@cn	na.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address X is changed)	www.cna.com			
	′ <u> </u>			
2. DATE 0.3				
3. FEC IDENTIFICA	TION NUMBER	C C00078287		
4. IS THIS STATEM	MENT NEW (N) OR	X AMENDED (A)		
	_			
I certify that I have exam	ined this Statement and to the best of my kn	nowledge and belief it is true, corre	ct and complete	
	Varan E Malah			
Type or Print Name of	Treasurer Karen E. Melch	ert		
Signature of Treasurer	Electronically Filed by Karen E.	Melchert	Date 03	/ 24 / Y Y Y O O 9
NOTE: Submission of fa	lse, erroneous, or incomplete information m		•	-
	ANY CHANGE IN INFORM	ATION SHOULD BE REPORT	WITHIN 10 DAYS טב	
Office Use Only		For further informat Federal Election Com Toll Free 800-424-95	ımission	FEC FORM 1 (Revised 02/2009)